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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Renee	
	your government-issued picture identification (for	First name	First name
	example, your driver's	D.	
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Maentanis	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6953	

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Debtor 1 Renee D. Maentanis

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)
		EINS	EINs
5.	Where you live	100 N. Milwaukee Ave., Apt. 708 Wheeling, IL 60090	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Renee D. Maentanis

ar	Tell the Court About	Your Bank	ruptcy C	Case				
	The chapter of the Bankruptcy Code you are				ch, see <i>Notice Required by</i> and check the appropria	v 11 U.S.C. § 342(b) for Individuals Filing for E te box.	Bankruptcy	
	choosing to file under	■ Chapter 7						
		☐ Chapt	er 11					
		☐ Chapt						
		□ Chapt						
		·						
	How you will pay the fee	abo ord	out how y er. If you	ou may pay. Typically	, if you are paying the fee y	ck with the clerk's office in your local court for ourself, you may pay with cash, cashier's che half, your attorney may pay with a credit card	ck, or money	
		_	-	ay the fee in installme ee in Installments (Off	,	ion, sign and attach the Application for Individ	luals to Pay	
						on only if you are filing for Chapter 7. By law, a		
		but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out						
		the	Applicat	tion to Have the Chapt	er 7 Filing Fee Waived (Offi	icial Form 103B) and file it with your petition.		
•	Have you filed for bankruptcy within the last 8 years?	■ No.						
	last o years:	□ res.	District	•	When	Case number		
			District		When	Case number		
			District		When	Case number		
0.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is	☐ Yes.						
	not filing this case with							
	you, or by a business partner, or by an							
	affiliate?		D 1.			B 1 4 1 1 1		
			Debtor	-	When	Relationship to you  Case number, if known		
			District Debtor		vviieii	Relationship to you		
			District		When	Case number, if known		
			2.0	• =				
1.	Do you rent your	■ No.	Go to	line 12.				
	residence?	☐ Yes.	Has	your landlord obtained	an eviction judgment again	st you and do you want to stay in your resider	nce?	
		<b>□</b> 165.		No. Go to line 12.	and a street of a street of the street of th			
					Statement About an Eviction	Judgment Against You (Form 101A) and file	it with this	
			_	bankruptcy petition.		3		

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Case number (if known) Debtor 1 Renee D. Maentanis Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs

Number, Street, City, State & Zip Code

urgent repairs?

Debtor 1 Renee D. Maentanis Page 5 of 67 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Renee D. Maentar	nis	Document	Page 6 of 67	10/02/17 1:50PM • (if known)
Par			anorting Purposes		
	What kind of debts do	16a.		or dobto? Consumor dobto are defin	od in 14 II S.C. \$ 404/0) on "inquired by on
10.	you have?	10a.	individual primarily for a personal, fa		ed in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		s debts? Business debts are debts to through the operation of the busin	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you owe that	t are not consumer debts or business	s debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.	
	Do you estimate that after any exempt property is excluded and	■ Yes.		estimate that after any exempt properto distribute to unsecured creditors?	erty is excluded and administrative expenses
	administrative expenses		■ No		
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes		
18.	How many Creditors do you estimate that you	<b>1</b> -49		☐ 1,000-5,000	<u></u> 25,001-50,000
	owe?	□ 50-99 □ 100-1 □ 200-9	99	□ 5001-10,000 □ 10,001-25,000	☐ 50,001-100,000 ☐ More than100,000
19.	How much do you	<b>s</b> 0 - \$	550.000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		σι φισο,σσο	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion
			,001 4000,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
20.	How much do you estimate your liabilities	<b>\$0 - \$</b>	,00,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	to be?		σοι φισο,σσο	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
			,001 - ψ000,000	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
Par	Sign Below				
For	you	I have ex	kamined this petition, and I declare ur	nder penalty of perjury that the inform	nation provided is true and correct.
			chosen to file under Chapter 7, I am a tates Code. I understand the relief av		under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.
			rney represents me and I did not pay nt, I have obtained and read the notic		an attorney to help me fill out this
		I request	relief in accordance with the chapter	of title 11, United States Code, spec	ified in this petition.
		bankrupt and 357	tcy case can result in fines up to \$250		r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Renee	D. Maentanis e of Debtor 1	Signature of Debtor	2

Executed on

MM / DD / YYYY

Executed on October 2, 2017

MM / DD / YYYY

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Debtor 1 Renee D. Maentanis

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David M. Siegel	Date	October 2, 2017
Signature of Attorney for Debtor	_	MM / DD / YYYY
David M. Siegel		
Printed name		
David M. Siegel & Associates		
Firm name		
790 Chaddick Drive		
Wheeling, IL 60090		
Number, Street, City, State & ZIP Code		
Contact phone (847) 520-8100	Email address	
#06207611		
Bar number & State		

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Document Page 8 of 67 Fill in this information to identify your case: Debtor 1 Renee D. Maentanis First Name Middle Name Last Name Debtor 2 First Name Middle Name Last Name

(Spouse if, filing) NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filling amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

## Part 1: Summarize Your Assets Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 47.625.00 1c. Copy line 63, Total of all property on Schedule A/B..... 47,625.00 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 0.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 48,523.00 Your total liabilities 48.523.00 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 800.00 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 800.00 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have?

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form \$ 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

800.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Renee D. Maentanis

From Part 4 on Schedule E/F, copy the following:	Total cl	aim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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Desc Main Case 17-29490 Document Page 10 of 67 Fill in this information to identify your case and this filing: Debtor 1 Renee D. Maentanis First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ■ No ☐ Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... **Household Goods and Furniture** \$800.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

□ No

Yes. Describe.....

Case 17-29490

Debtor 1 Renee D. Maentanis

	TV & Electronics	\$200.00
Examp ■ No	bles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin other collections, memorabilia, collectibles Describe	, or baseball card collections;
Examp  No	tent for sports and hobbies  les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes musical instruments  Describe	and kayaks; carpentry tools;
■ No	ms ples: Pistols, rifles, shotguns, ammunition, and related equipment  Describe	
☐ No	bles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  Describe	
	Normal Apparel	\$600.00
■ No □ Yes  13. Non-fa Exam □ No	ples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, go Describe  Irm animals ples: Dogs, cats, birds, horses  Describe	yolu, Siivei
	1. Cat	\$25.00
■ No	ther personal and household items you did not already list, including any health aids you did not list  Give specific information	
	the dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here	\$1,625.00
Part 4: Do	escribe Your Financial Assets	
Do you o	wn or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. <b>Cash</b> Exam ■ No	oles: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petiti	ion

8.

9.

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Case number (if known) Document Debtor 1 Renee D. Maentanis 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... **US Bank Checking Account** (Joint Account with Ron Paul) \$1,000.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: IRA (Vanguard) \$45,000.00 **ERISA Qualified** 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No  $\hfill \square$  Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

☐ Yes. Give specific information about them...

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Case number (if known) Document Debtor 1 Renee D. Maentanis Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Life Insurance Policies Term \$0.00 **Death Benefit Only** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No  $\square$  Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$46,000.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

■ No

☐ Yes. Go to line 38.

☐ Yes. Give specific information..

Debtor	Case 17-29490 Renee D. Maentanis		ed 10/02/17 ocument	Entered 10 Page 14 of 0	0/02/17 14:06:23 67 Case number (if known)	Desc Main	10/02/17 1:50PM
	<u> </u>				,		
Part 6:	Describe Any Farm- and Common If you own or have an interest in fa			n or Have an Interes	t in.		
46. <b>Do</b>	you own or have any legal or	r equitable interes	t in any farm- or	commercial fishing	g-related property?		
	No. Go to Part 7.	•	•				
	Yes. Go to line 47.						
Part 7:	Describe All Property You	Own or Have an Inte	rest in That You Did	d Not List Above			
	you have other property of a camples: Season tickets, country		ot already list?				
	lo						
	es. Give specific information						
54. <b>A</b>	dd the dollar value of all of yo	our entries from P	art 7. Write that n	umber here			\$0.00
Part 8:	List the Totals of Each Part	of this Form					
55. <b>P</b>	art 1: Total real estate, line 2						\$0.00
56. <b>P</b>	art 2: Total vehicles, line 5			\$0.00			
57. <b>P</b>	art 3: Total personal and hou	sehold items, line	15	\$1,625.00			
58. <b>P</b>	art 4: Total financial assets, li	ine 36		\$46,000.00			
	art 5: Total business-related			\$0.00			
	art 6: Total farm- and fishing-		ine 52	\$0.00			
61. <b>P</b>	art 7: Total other property not	t listed, line 54	+	\$0.00			

\$47,625.00

Copy personal property total

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$47,625.00

\$47,625.00

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Document Page 15 of 67 Fill in this information to identify your case: Debtor 1 Renee D. Maentanis First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106C Schedule C: The Property You Claim as Exempt 4/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and

case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exem	ptions are :	you claiming?	Check one only	, even if you	r spouse is filing

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

- y with you.
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

Part 1: Identify the Property You Claim as Exempt

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Ched		
Household Goods and Furniture Line from Schedule A/B: 6.1	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
Ellie Helli ediloddie 775. GT			100% of fair market value, up to any applicable statutory limit	
TV & Electronics Line from Schedule A/B: 7.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Line Holli Schedule A.B. 1.1			100% of fair market value, up to any applicable statutory limit	
Normal Apparel	\$600.00		\$600.00	735 ILCS 5/12-1001(a)
Line from Schedule A/D. 1111			100% of fair market value, up to any applicable statutory limit	
1. Cat Line from Schedule A/B: 13.1	\$25.00		\$25.00	735 ILCS 5/12-1001(b)
Line Horr Schedule Add. 13.1			100% of fair market value, up to any applicable statutory limit	
Checking Account: US Bank (Joint Account with Ron Paul)	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
Line Holli Schedule A/B. 11.1		_	, , , , , , , , , , , , , , , , , , ,	

Desc Main Case 17-29490 Doc 1 Filed 10/02/17 Entered 10/02/17 14:06:23 Document Page 16 of 67 Renee D. Maentanis Case number (if known) Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B IRA (Vanguard): ERISA Qualified 735 ILCS 5/12-1006 \$45,000.00 \$45,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit **Life Insurance Policies Term** 215 ILCS 5/238 \$0.00 \$0.00 **Death Benefit Only** Line from Schedule A/B: 31.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

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		1 27 17 17 17 17		
Fill in this infor	mation to identify your	case:		
Debtor 1	Renee D. Maenta	nis		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this amended fil

## Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

	Ca	se 17-29490	Doc 1 F	iled 10/02/17 Document	Entered 10/02/17 14:06:23 Page 18 of 67	3 Desc M	lain 10/02/17 1:50PN
Fill	in this inform	nation to identify you	r case:	12(1/11)			
	otor 1	Renee D. Maenta					
DCI	3101 1	First Name	Middle	Name	Last Name		
	otor 2						
(Spo	ouse if, filing)	First Name	Middle	Name	Last Name		
Uni	ted States Bar	nkruptcy Court for the:	NORTHER	RN DISTRICT OF ILL	INOIS		
Cas	se number						
	nown)					☐ Check	if this is an
						amend	led filing
⊃tt	ioial Earm	106E/E					
	icial Form		Mha Hav	llncooured	Claims		12/15
		/F: Creditors \			Claims  / claims and Part 2 for creditors with NONPR	IODITY II.' I'	
Sche eft. name	edule D: Credito Attach the Cont e and case num	ors Who Have Claims Se tinuation Page to this pa	ecured by Prope age. If you have	erty. If more space is n no information to rep	o not include any creditors with partially sec eeded, copy the Part you need, fill it out, nur ort in a Part, do not file that Part. On the top	nber the entries ir	n the boxes on the
		rs have priority unsecu					
•	No. Go to Pa		ou olumb ugui	not you.			
	Yes.	ait Z.					
Par		l of Your NONPRIOR	ITY Unsecure	d Claims			
		rs have nonpriority uns					
	_	re nothing to report in this			our other schedules		
		e nothing to report in this	part. Odbinit tili	s form to the court with y	our other sorteduies.		
	Yes.						
4.	unsecured claim	n, list the creditor separate	ely for each clair	n. For each claim listed,	e creditor who holds each claim. If a creditor hidentify what type of claim it is. Do not list claim ave more than three nonpriority unsecured claim	s already included	in Part 1. If more
						Tota	al claim
4.1		ka E Kowalska Pt		Last 4 digits of acco	ount number		\$87.00
		Creditor's Name		When was the debt	incurred?		
	Suite 11	•		When was the debt			
		Grove, IL 60089					
		reet City State Zlp Code		As of the date you fi	ile, the claim is: Check all that apply		
	_	red the debt? Check one	е.	_			
	■ Debtor	,		Contingent			
	☐ Debtor	•		Unliquidated			
		1 and Debtor 2 only		Disputed	TV unacquired alaims		
		one of the debtors and a		Student loans	TY unsecured claim:		
	∐ Check debt	if this claim is for a cor	nmunity		g out of a separation agreement or divorce that y	ou did not	
		m subject to offset?		report as priority clain		you did fiot	
	■ No			☐ Debts to pension	or profit-sharing plans, and other similar debts		
	☐ Yes			Other. Specify	Medical		
				-, -, _			

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Debto	Renee D. Maentanis	Case number (if know)				
4.2	Alex B Lipowich Md	Last 4 digits of account number 5377	\$20.00			
	Nonpriority Creditor's Name  800 Biesterfield Rd	When was the debt incurred? Opened 03/12				
	Elk Grove Village, IL 60007  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Collection				
4.3	Alice Y Yao-Lee Md	Last 4 digits of account number	\$29.00			
	Nonpriority Creditor's Name c/o Northwest Radiology	When was the debt incurred?				
	Associates					
	520 E 22nd St. Lombard, IL 60148					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Medical				
4.4	American Specialty	Last 4 digits of account number	\$260.00			
	Nonpriority Creditor's Name 12800 N Meridian St Carmel, IN 46032	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	,				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other Specify Medical				

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4.5	Amerimark	Last 4 digits of account number	\$85.00
	Nonpriority Creditor's Name	When we she delet in some 10	<u> </u>
	1112 7th Ave. Monroe, WI 53566	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Purchases	
4.6	Ami K Kothari, MD	Last 4 digits of account number	\$97.00
	Nonpriority Creditor's Name	When we the debt in some do	
	9000 Waukegan Rd Suite 200	When was the debt incurred?	
	Morton Grove, IL 60053		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	Other. Specify  Medical  Other Specify  Medical	
4.7	Arlington Ridge Pathology S.C.	Last 4 digits of account number	\$82.00
	Nonpriority Creditor's Name 520 E. 22nd St.	When was the debt incurred?	
	Lombard, IL 60148  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collections	

Debtor 1 Renee D. Maentanis

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Debtor 1 Renee D. Maentanis 4.8 \$882.00 Belden Jewelers/Sterling Jewelers Last 4 digits of account number 9296 Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/15 Last Active Po Box 1799 When was the debt incurred? 5/17/17 Akron, OH 44309 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Purchases** Other, Specify **Bioreference Laboratories** 4.9 Last 4 digits of account number \$276.00 Nonpriority Creditor's Name When was the debt incurred? 481 Edward H Ross Drive Elmwood Park, NJ 07407-3118 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes 4.1 **Brooktree Health Service** \$0.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 6500 Brooktree Rd When was the debt incurred? Suite 101 Wexford, PA 15090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify NOTICE ONLY

☐ Yes

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Page 22 of 67 Case number (if know) Debtor 1 Renee D. Maentanis 4.1 Capital One 1142 \$34.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 05/16 Last Active Po Box 30253 When was the debt incurred? 7/08/17 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Purchases 4.1 **CB/Boston Store** 3189 \$160.00 Last 4 digits of account number 2 Nonpriority Creditor's Name **Bankruptcy Department** Opened 06/17 Last Active PO Box 182125 When was the debt incurred? 7/26/17 Columbus, OH 43218-2125 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Purchases ☐ Yes 4.1 **CB/Carsons** 0991 \$150.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 10/14 Last Active PO Box 182789 7/07/17 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

T Yes

■ Other. Specify Purchases

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Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Purchases ☐ Yes

Comcast 6566 \$111.00 Last 4 digits of account number Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? **Opened 04/15** 11621 E. Marginal Way 5 Tukwila, WA 98168-1965 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ Other. Specify Collections

Debts to pension or profit-sharing plans, and other similar debts

4.1 David F DuBois, Md 0603 Last 4 digits of account number Nonpriority Creditor's Name c/o Northwest Community Hospital When was the debt incurred? Opened 9/22/16 P.O. Box 5990 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

4.1

■ No

☐ Yes

6

■ Other. Specify Collections

\$365.00

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First Premier Bank	Last 4 digits of account number	4407	\$967
Nonpriority Creditor's Name  Bankruptcy Department  PO Box 5523	When was the debt incurred?	Opened 01/15 Last Active 4/11/15	
Sioux Falls, SD 57117  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	O continuous		
Debtor 2 only	☐ Contingent ☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	Other Specify Purchases		
		Quinn	
Illinois Bone & Joint	Last 4 digits of account number	Regan, Md	\$39
Nonpriority Creditor's Name 135 S LaSalle Dpt. 1052 Chicago, IL 60674-1052	When was the debt incurred?		
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Medical		
Jacob L. Moskovic, MD	Last 4 digits of account number		\$0
Nonpriority Creditor's Name 120 W Eastman Street	When was the debt incurred?		
Suite 202 Arlington Heights, IL 60004			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	o plans, and other similar debts	
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Debtor 1 Renee D. Maentanis

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Case number (if know)

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KAREN J WOODNORTH, LCPC, 4.2 \$57.00 0 **CADC** Last 4 digits of account number Nonpriority Creditor's Name 23401 N APPLE HILL LN When was the debt incurred? Lincolnshire, IL 60069-2811 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No Medical ☐ Yes Other. Specify 4.2 **Kay Jewelers** \$800.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 740425 When was the debt incurred? Cincinnati, OH 45274-0425 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Purchases 4.2 9993 \$662.00 Kohls/Capital One Last 4 digits of account number Nonpriority Creditor's Name **Kohls Credit** Opened 03/14 Last Active Po Box 3043 When was the debt incurred? 7/11/17 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Purchases ☐ Yes

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Debtor 1 Renee D. Maentanis 4.2 Mabtc/tfc 9248 \$167.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 5/31/17 Last Active Po Box 13306 When was the debt incurred? 6/20/17 Virginia Beach, VA 23464 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Purchases ☐ Yes 4.2 Massey \$565.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1251 1st Ave Chippewa Falls, WI 54729 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Collections Other. Specify 4.2 Midnight Velvet **3550** \$271.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Attn: Bankruptcy Opened 02/16 Last Active 1112 7th Ave When was the debt incurred? 7/10/17 Monroe, WI 53566 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Purchases** Other, Specify

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Nonpriority Creations - Name PO Box 1123 Jackson, Mil 49204 Number Street City State 2 Docide Who incurred the debt? Check one.  Debtor 1 only Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply Debtor 1 and Debtor 2 only State The Check if this claim is for a community debt Check if this claim is for a community debt Check if Check if this claim is for a community Add The Check if Check one. Debtor 1 only Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply When was the debt incurred? Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Nonprority Claims  Monroe And Main Nonprority Creditors Name 1112 Seventha Ave. Monroe, WI 53566 Number Street City, State 2 Dc Code Who Incurred the debt? Check one. Debtor 2 only Check if this claim is for a community Check i	4.2	Midwest Anes Partners	Last 4 digits of account number		\$129.00
Jackson, Mi 49204   Number Street City State 2/b Code   Who incurred the debt? Check one.   Debtor 1 only   Contingent   Unliquidated   Debtor 1 and Debtor 2 only   Disputed   Disputed   Debtor 1 and Debtor 2 only   Disputed   Di		·	_		
Number Street City State 2 pc Code   No incurred the debt? Check one.   Debtor 1 only   Unliquidated   Unliqu					
Debtor 2 only   Disputed   Disp		Number Street City State ZIp Code	As of the date you file, the claim	s: Check all that apply	
Debtor 1 and Debtor 2 only		Debtor 1 only	☐ Contingent		
At least one of the debtors and another   Check if this claim is for a community debt   Student loans   Check if this claim is for a community debt   Student loans   Check if this claim is for a community debt   Chicago, IL 60689-5334   Number Street City States (2 Pode Who incurred the debt) Conter. Specify   Medical   Chicago, IL 60689-5334   Chicago, IL 60689-6334		☐ Debtor 2 only	☐ Unliquidated		
Check if this claim is for a community debt   Student loans   Check if this claim subject to offset?   Contingent   Check if this claim is for a community debt   Contingent   Check one.   Contingent   Co		☐ Debtor 1 and Debtor 2 only	☐ Disputed		
Creek it in its claim is to a community debt   st the claim subject to offset?   Contingent   Check if this claim is for a community debt   Stee claim subject to offset?   Contingent   Check if this claim is for a community debt   Check if this claim is for a community debt   Check one.   Check if this claim is for a community debt   Check one.   Check if this claim is for a community debt   Check one.   Check if this claim is for a community debt   Check one.   Check if this claim is for a community debt   Check one.   Check if this claim is for a community debt		☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
debt   st the ctaim subject to offset?   Contingent   C		☐ Check if this claim is for a community	☐ Student loans		
No				ration agreement or divorce that you did not	
Ves   Midwest Anesthesia LTD   Last 4 digits of account number   7477   \$129.00		<u> </u>	<u>-</u>	a plane, and other similar debte	
Midwest Anesthesia LTD   Last 4 digits of account number   7477   \$129.00			·	g plans, and other similar debts	
Nonpriority Creditor's Name   Sale A digits of account number   1417   Sale Sale Sale		∐ Yes	Other. Specify Medical		
34Ô7 Momentum Place Chicago, IL 60689-5334 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 steed Edity and another Check if this claim is for a community debt Is the claim subject to offset?  Monroe And Main Nonpriority Creditor's Name Tit2 Seventh Ave. Monroe, WI 53566 Number Street City State Zip Code Who incurred the debtors and another Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 4 least one of the debtors and another Debtor 5 only Debtor 6 only Debtor 1 only Debtor 3 only Debtor 4 least one of the debtors and another Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 least one of the debtors and another Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 9 on	4.2	Midwest Anesthesia LTD	Last 4 digits of account number	7477	\$129.00
Number Street City State Zip Code Who incurred the debt? Check one.    Debtor 1 only		3407 Momentum Place	When was the debt incurred?	Opened 07/16	
Who incurred the debt? Check one.    Debtor 1 only			As of the date you file, the claim	s: Check all that apply	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Debts to pension or profit-sharing plans, and other similar debts  As of the date you file, the claim is: Check all that apply  Monroe, WI 53566 Number Street City State Zip Code Who incurred the debt? Check one.  Debts 1 and Debtor 2 only Debts 0 pension or profit-sharing plans, and other similar debts  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As least 0 of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Debts to pension or profit-sharing plans, and other similar debts  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Debts to pension or profit-sharing plans, and other similar debts			• ,		
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Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Debts to pension or profit-sharing plans, and other similar debts		☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
debt Is the claim subject to offset? Is the claim subject to offset? In No In Debts to pension or profit-sharing plans, and other similar debts In No In Debts to pension or profit-sharing plans, and other similar debts In Other. Specify Collections  Monroe And Main Nonpriority Creditor's Name  Monroe, WI 53566 Number Street City State Zip Code Who incurred the debt? Check one. In Debtor 1 only In Debtor 2 only In Debtor 2 only In Debtor 1 and Debtor 2 only In Contingent In Check if this claim is for a community debt Is the claim subject to offset? In No In Debts on pension or profit-sharing plans, and other similar debts  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  Opened 04/17 Last Active 7/10/17  Opened 04/17 Last		☐ Check if this claim is for a community	☐ Student loans		
Debts to pension or profit-sharing plans, and other similar debts    Yes		debt		ration agreement or divorce that you did not	
Monroe And Main Nonpriority Creditor's Name  1112 Seventh Ave. Monroe, WI 53566 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  Opened 04/17 Last Active 7/10/17				g plans, and other similar debts	
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Nonpriority Creditor's Name  1112 Seventh Ave. Monroe, WI 53566  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  Debts to pension or profit-sharing plans, and other similar debts  1110 \$110 \$110 \$1157.0			- Other. Specify	<u> </u>	
1112 Seventh Ave. Monroe, WI 53566  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  No  Opened 04/17 Last Active 7/10/17  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Toekck all that apply  Opened 04/17 Last Active 7/10/17  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Check all that apply  Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts		Monroe And Main	Last 4 digits of account number	3110	\$157.00
Monroe, WI 53566  Number Street City State ZIp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?  No  When was the debt incurred?  7/10/17  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Lontingent Debtor 1 only Disputed  Type of NONPRIORITY unsecured claim: Student loans Debtar a spriority claims Debtar to offset? Debtar to offset? Debtar to offset? Debtar to pension or profit-sharing plans, and other similar debts		Nonpriority Creditor's Name	_	On an ad 0.4/47   Last Astinus	
Number Street City State Zlp Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts			When was the debt incurred?		
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		Debtor 1 only	☐ Contingent		
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts			<del>-</del>		
□ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts			<u> </u>		
☐ Check if this claim is for a community debt  Is the claim subject to offset?  No  ☐ Check if this claim is for a community Dobligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts		_	'	d claim:	
debt  Is the claim subject to offset?  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  No  Debts to pension or profit-sharing plans, and other similar debts		<u></u>			
■ No □ Debts to pension or profit-sharing plans, and other similar debts		debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
				g plans, and other similar debts	
onion opeon,			Other. Specify Purchases		

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4.2	NCH Medical Group	Last 4 digits of account number	\$365.00
	Nonpriority Creditor's Name 25228 Network Place	When was the debt incurred?	
	Chicago, IL 60673-1252		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify Medical	
4.3	Northwest Community Healthcare	Last 4 digits of account number	\$20.00
	Nonpriority Creditor's Name PO Box 22215	When was the debt incurred?	
	Beachwood, OH 44122  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The of the date year me, and statum for official and apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical	
4.3	Northwest Community Hospital	Last 4 digits of account number	\$200.00
<u>.                                    </u>	Nonpriority Creditor's Name P.O. Box 5990	When was the debt incurred?	
	Carol Stream, IL 60197	As of the data confile the plate to Oheal all that such	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	

Debtor 1 Renee D. Maentanis

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Case number (if know) Debtor 1 Renee D. Maentanis 4.3 **Northwest Community Hospital** \$45.00 Last 4 digits of account number 2 Nonpriority Creditor's Name **Schaumburg Treatment Center** When was the debt incurred? 519 South Roselle Road Schaumburg, IL 60193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.3 **Northwest Radiology Associates** \$17.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Po Box 646 When was the debt incurred? Oak Lawn, IL 60454 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical Northwest Suburban Foot & Ankle 4.3 \$35.00 Last 4 digits of account number Cli Nonpriority Creditor's Name 2010 N Harlem Ave When was the debt incurred? Elmwood Park, IL 60707-3119 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Medical

Desc Main

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4.3 5	Oracle Reference Labs, LLC	Last 4 digits of account number	\$792.00
	Nonpriority Creditor's Name 11350 SW Village Parkway	When was the debt incurred?	
	Suite 326 Port Saint Lucie, FL 34987-2352		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt	Dobligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.3	Premier Vien Center	Last 4 digits of account number 3590	\$250.00
6	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ230.00
	520 E 22nd Street	When was the debt incurred?	
	Lombard, IL 60148		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	$\square$ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical	
4.3	Sharon Spak-Schreiner, MD	Last 4 digits of account number	\$149.00
٠	Nonpriority Creditor's Name		
	1051 W Rand Rd Suite 100	When was the debt incurred?	
	Arlington Heights, IL 60004	_	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical	

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4.3	SYNCB/Pay Pal	Last 4 digits of account number	2551	\$210.00
	Nonpriority Creditor's Name  Bankrupcty Notice	When was the debt incurred?		
	PO Box 5138 Timonium, MD 21094 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Purchases		
4.3	Syncb/PLCC	Last 4 digits of account number	2884	\$98.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965064	When was the debt incurred?	Opened 05/94 Last Active 7/21/17	
	Orlando, FL 32896  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	• ,		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Purchases		
4.4	Synchrony Bank/ JC Penneys	Last 4 digits of account number	1238	\$444.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 956060	When was the debt incurred?	Opened 05/17 Last Active 7/21/17	
	Orlando, FL 32896  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,	an anat appri	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Purchases		

Debtor 1 Renee D. Maentanis

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Debtor 1 Renee D. Maentanis

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Synchrony Bank/Gap	Last 4 digits of account number	2551	\$230.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 956060	When was the debt incurred?	Opened 03/17 Last Active 7/12/17	
Orlando, FL 32896  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that annly	
Who incurred the debt? Check one.	, to or the date you me, the claim	o. Oncox an max apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Purchases		
Synchrony Bank/Sams	Last 4 digits of account number	8586	\$109.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 12/14 Last Active 7/03/17	
Orlando, FL 32896 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	,		
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Purchases		
Synchrony Bank/Walmart	Last 4 digits of account number	7486	\$145.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 956060	When was the debt incurred?	Opened 04/17 Last Active 7/04/17	
Orlando, FL 32896 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.		,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Purchases		

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Debtor 1 Renee D. Maentanis 4.4 **THD/CBNA (Home Depot)** \$249.00 Last 4 digits of account number 4 Nonpriority Creditor's Name PO Box 6497 When was the debt incurred? Sioux Falls, SD 57117-6497 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Purchases ☐ Yes 4.4 The Palm Beach Institute 2007 \$37,283.00 Last 4 digits of account number Nonpriority Creditor's Name 314 10th Street When was the debt incurred? West Palm Beach, FL 33401 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical ☐ Yes 4.4 US Bank/Rms CC 4060 \$1.093.00 Last 4 digits of account number 6 Nonpriority Creditor's Name **Card Member Services** Opened 10/14 Last Active Po Box 108 When was the debt incurred? 6/09/17 St Louis, MO 63166 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Purchases ☐ Yes

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Debto	Pr 1 Renee D. Maentanis	Case number (if know)	
4.4	Viant Health Payment Solutions	Last 4 digits of account number	\$180.00
,	Nonpriority Creditor's Name 1105 West 2400 South	When was the debt incurred?	<u> </u>
	Salt Lake City, UT 84119		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Medical	
		— Other. Specify	
Part :	3: List Others to Be Notified About a D	Debt That You Already Listed	
is tr have	this page only if you have others to be notified ying to collect from you for a debt you owe to	d about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a c someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. S hat you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional	Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	1/Dress Barn 3ox 5253	Line 4.14 of (Check one):	
_	ol Stream, IL 60197	■ Part 2: Creditors with Nonpriority Unsecured Claims	
		Last 4 digits of account number	
Name	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	DRSSBRN	Line <u>4.14</u> of ( <i>Check one</i> ): ☐ Part 1: Creditors with Priority Unsecured Claims	
_	3ox 182273 Imbus, OH 43218-2273	Part 2: Creditors with Nonpriority Unsecured Claims	
00.0		Last 4 digits of account number	
Name	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Choi	ice Recovery Inc	Line 4.2 of (Check one):	
	Old Henderson Rd Ste 100	Part 2: Creditors with Nonpriority Unsecured Claims	
Colu	ımbus, OH 43220	Last 4 digits of account number	
Mana	and Address	On which particular Dort A or Dort O did you like the particular and the O	
	and Address nenity Bank/Carsons	On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.13 of (Check one):	
3100	Easton Square Pl.	■ Part 2: Creditors with Nonpriority Unsecured Claims	
Colu	ımbus, OH 43219	Last 4 digits of account number	
		Last 4 digits of account number	
	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	vergent Outsoucing, Inc Box 9004	Line 4.15 of (Check one):	
	ton, WA 98057	■ Part 2: Creditors with Nonpriority Unsecured Claims	
		Last 4 digits of account number	
Name	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	Premier Bank	Line <u>4.17</u> of ( <i>Check one</i> ): ☐ Part 1: Creditors with Priority Unsecured Claims	
	N. Louise Ave. x Falls, SD 57107	Part 2: Creditors with Nonpriority Unsecured Claims	
Olou	A 1 alis, 0D 37 107	Last 4 digits of account number	
Name	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	esis FS Card Servics (Kay	Line 4.21 of (Check one):	
Jew	ele	Part 2: Creditors with Nonpriority Unsecured Claims	
_	3ox 4480 verton, OR 97076-4485	, ,	
D€d\	verton, ON 9/0/0-4400	Last 4 digits of account number	
Name	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
. 141116	a	on minor only in rail rail and and you not the original election:	

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Renee D. Maentanis		Case number (if know)				
Harris & Harris 111 W Jackson Blvd. Suite 400 Chicago, IL 60604	Line <u>4.16</u> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number					
Name and Address Harris & Harris, Ltd 111 West Jackson Blvd Suite 400 Chicago, IL 60604	On which entry in Part 1 or Part 2 Line <b>4.30</b> of ( <i>Check one</i> ):	e did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims				
5.110ago, 12 00004	Last 4 digits of account number					
Name and Address Home Depot Bankruptcy Department PO Box 20483 Kansas City, MO 64195	On which entry in Part 1 or Part 2 Line 4.44 of ( <i>Check one</i> ):  Last 4 digits of account number	did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address Home Depot Credit Services PO Box 182676 Columbus, OH 43218-2676	On which entry in Part 1 or Part 2 Line 4.44 of (Check one):  Last 4 digits of account number	e did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address IC Systems 444 Highway 96 East Saint Paul, MN 55164	On which entry in Part 1 or Part 2 Line 4.24 of (Check one):  Last 4 digits of account number	edid you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address Med Business Bureau 1460 Renaissance Dr #400 Park Ridge, IL 60068	On which entry in Part 1 or Part 2 Line 4.27 of (Check one):  Last 4 digits of account number	edid you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address  Medical Recovery Specialists 2250 E. Devon Ave., Ste. 352  Des Plaines, IL 60018	On which entry in Part 1 or Part 2 Line 4.7 of (Check one):  Last 4 digits of account number	edid you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address Miramed 255 W. Michigan Ave. Jackson, MI 49201	On which entry in Part 1 or Part 2 Line 4.31 of (Check one):	did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address WFNNB/DRESSBARN Bankruptcy Department PO Box 182789 Columbus, OH 43218	Last 4 digits of account number  On which entry in Part 1 or Part 2  Line 4.14 of (Check one):  Last 4 digits of account number	did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims				

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00

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· · · · · · · · · · · · · · · · · · ·		-			•
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	Φ.	Total Claim
Total claims	OI.	Student loans	Oi.	\$	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	48,523.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	48,523.00

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		DOCUME	<u>eni Pade 37 di 67</u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Renee D. Maenta	nis		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			_
					_
	City		State	ZIP Code	
2.4					
	Name				<del></del>
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	INGILIE				
	Number	Street			_
					<u> </u>
	City		State	ZIP Code	

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Fill in this	s information to identify your	case:			
Debtor 1	Renee D. Maenta	nis			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	ber				
(if known)					☐ Check if this is an amended filing
Officia	l Form 106H				
	dule H: Your Cod	ebtors			12/15
		<del></del>			
our name	and number the entries in the and case number (if known) you have any codebtors? (If	. Answer every question			any Additional Pages, write
■ No					
	thin the last 8 years, have you na, California, Idaho, Louisiana,				tes and territories include
	. Go to line 3. s. Did your spouse, former spou	use, or legal equivalent live	e with you at the time?		
	, , , ,	,	·		
in line Form	e 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed the cr	th you. List the person shown reditor on Schedule D (Official edule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The credito	r to whom you owe the debt
				_	
3.1	Name			Schedule D, line	
				☐ Schedule E/F, line☐ Schedule G, line☐	
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
( <u>-</u>	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
-	Number Street			_	
	City	State	ZIP Code		

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	in this information to identify your cotor 1 Renee D. Ma								
	otor 2  puse, if filing)				_				
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS						
	se number 						ded filing ment show	ing postpetition chapte following date:	r
0	fficial Form 106l					MM / DD	YYYY		
S	chedule I: Your Inc	ome						12	/1!
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filing w	ng jointly, and your s ith you, do not includ	pouse e infor	is liv matic	ing with you, in on about your s	clude info pouse. If r	rmation about your nore space is needed	l,
1.	Fill in your employment information.		Debtor 1			Debto	r 2 or non-	filing spouse	
	If you have more than one job,	Employment status	☐ Employed	☐ Employed			ployed		
	attach a separate page with information about additional	Employment status	■ Not employed	■ Not employed			employed		
	employers.	Occupation							
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	oort for	any	line, write \$0 in the	ne space. I	nclude your non-filing	
	u or your non-filing spouse have mo		ombine the information	for all e	emplo	oyers for that per	son on the	lines below. If you nee	d
						For Debtor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	<u> </u>	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	

0.00

N/A

Calculate gross Income. Add line 2 + line 3.

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Debtor	1 Renee D. Maentanis			Case n	umber (if known)			
				For I	Debtor 1		ebtor 2 or iling spouse	
С	copy line 4 here		4.	\$	0.00	\$	N/A	
5 I								
	ist all payroll deductions:			•		Φ.		
	a. Tax, Medicare, and Social Security deduc		5a.	\$ \$	0.00	\$	N/A	
	<ul> <li>Mandatory contributions for retirement p</li> <li>Voluntary contributions for retirement plant</li> </ul>		5b. 5c.	\$ 	0.00	\$	N/A N/A	
	d. Required repayments of retirement fund		5d.	\$—	0.00	\$—	N/A	
5		iouno	5e.	\$	0.00	\$	N/A	
51			5f.	\$	0.00	\$	N/A	
5	0		5g.	\$	0.00	\$	N/A	
	h. Other deductions. Specify:		5h.+	\$		+ \$	N/A	
6. <b>A</b>	add the payroll deductions. Add lines 5a+5b+5	c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A	
7. <b>C</b>	calculate total monthly take-home pay. Subtract	ct line 6 from line 4.	7.	\$	0.00	\$	N/A	
	ist all other income regularly received:  a. Net income from rental property and fron profession, or farm  Attach a statement for each property and bu receipts, ordinary and necessary business e	siness showing gross						
	monthly net income.	•	8a.	\$	0.00	\$	N/A	
8	b. Interest and dividends		8b.	\$	0.00	\$	N/A	
8	<ul> <li>Family support payments that you, a non regularly receive</li> <li>Include alimony, spousal support, child support</li> </ul>							
	settlement, and property settlement.	,	8c.	\$	0.00	\$	N/A	
8	d. Unemployment compensation		8d.	\$	800.00	\$	N/A	
8	e. Social Security		8e.	\$	0.00	\$	N/A	
81	f. Other government assistance that you re Include cash assistance and the value (if kn that you receive, such as food stamps (bene Nutrition Assistance Program) or housing su Specify:	own) of any non-cash assistance efits under the Supplemental	_ 8f.	\$	0.00	\$	N/A	
8	g. Pension or retirement income		8g.	\$	0.00	\$	N/A	
8	h. Other monthly income. Specify:		_ 8h.+	\$	0.00	+ \$	N/A	
9. <b>A</b>	add all other income. Add lines 8a+8b+8c+8d+8	8e+8f+8g+8h.	9.	\$	800.00	\$	N/A	
10. <b>C</b>	Calculate monthly income. Add line 7 + line 9.	1	0. \$		800.00 + \$		N/A = \$	800.00
Α	dd the entries in line 10 for Debtor 1 and Debtor	2 or non-filing spouse.	L					
Ir of D	state all other regular contributions to the expendicude contributions from an unmarried partner, in their friends or relatives. To not include any amounts already included in line specify:	nembers of your household, your	depend		,	,	thedule J. 11. +\$	0.00
V	add the amount in the last column of line 10 to Write that amount on the Summary of Schedules applies						12. \$	800.00
							monthly i	
13. <b>D</b> ■	o you expect an increase or decrease within to No. Yes. Explain:	the year after you file this form?	•					

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Fill	in this information to identify your cas	e.					
	Renee D. Maentar			Ch	eck if this is:	ed filina	
	otor 2 ouse, if filing)				A supplem	ent shov	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: NO	RTHERN DISTRICT OF ILLING	OIS		MM / DD /	YYYY	
	e numbernown)						
Of	fficial Form 106J						
So	chedule J: Your Exp	enses					12/15
info nur	as complete and accurate as poss ormation. If more space is needed, mber (if known). Answer every que t1:  Describe Your Household Is this a joint case?	attach another sheet to this t					
	No. Go to line 2.						
	☐ Yes. <b>Does Debtor 2 live in a se</b> ☐ No☐ Yes. Debtor 2 must file C	parate nousehold? Official Form 106J-2, <i>Expenses</i>	for Separate Househ	old of De	ebtor 2.		
2.	Do you have dependents? ■ N	0					
	Do not list Debtor 1 and Y Debtor 2.	es. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Depend age	lent's	Does dependent live with you?
	Do not state the dependents names.						□ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?	■ No □ Yes					□ No □ Yes
Est exp	t 2: Estimate Your Ongoing Mo imate your expenses as of your ba benses as of a date after the bankru blicable date.	nkruptcy filing date unless y	ou are using this for lemental <i>Schedule</i> J	m as a I, check	supplement the box at ti	in a Cha ne top o	apter 13 case to report f the form and fill in the
the	lude expenses paid for with non-ca value of such assistance and have ficial Form 106I.)				Y	our expe	enses
4.	The rental or home ownership expayments and any rent for the grou		nclude first mortgage	4.	\$		400.00
	If not included in line 4:						
	<ul><li>4a. Real estate taxes</li><li>4b. Property, homeowner's, or re</li><li>4c. Home maintenance, repair, a</li></ul>			4a. 4b. 4c.	\$		0.00 0.00 0.00
	4d. Homeowner's association or	condominium dues		4d.	\$		0.00

0.00

5. Additional mortgage payments for your residence, such as home equity loans

Deb	tor 1	Renee D	. Maentanis	Case num	ber (if known)	
6.	Utilit	ties:				
	6a.	Electricity,	, heat, natural gas	6a.	\$	0.00
	6b.		wer, garbage collection	6b.	\$	0.00
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
	6d.	Other. Spe	ecify:	6d.	\$	0.00
7.	Food		ekeeping supplies	7.	\$	200.00
8.			children's education costs	8.	\$	0.00
9.			ry, and dry cleaning	9.	\$	0.00
		-	products and services	10.	\$	0.00
		-	ntal expenses	11.	·	0.00
			Include gas, maintenance, bus or train fare.			<u> </u>
		•	ar payments.	12.	\$	100.00
13.	Ente	rtainment,	clubs, recreation, newspapers, magazines, and boo	<b>ks</b> 13.	\$	0.00
14.	Char	ritable cont	ributions and religious donations	14.	\$	0.00
15.	Insur	rance.	•			
	Do no	ot include in	surance deducted from your pay or included in lines 4 c			
	15a.	Life insura	ance	15a.		0.00
	15b.	Health ins	urance	15b.	\$	0.00
	15c.	Vehicle in	surance	15c.	\$	100.00
	15d.	Other insu	rance. Specify:	15d.	\$	0.00
16.			clude taxes deducted from your pay or included in lines	4 or 20.		
	Spec			16.	\$	0.00
17.			ease payments:			
			ents for Vehicle 1	17a.	·	0.00
			ents for Vehicle 2	17b.	·	0.00
		Other. Spe	-	17c.	\$	0.00
		Other. Spe	•	17d.	\$	0.00
18.			of alimony, maintenance, and support that you did		¢	0.00
40			your pay on line 5, Schedule I, Your Income (Official		\$	
19.			s you make to support others who do not live with y		\$	0.00
20	Spec	·	anticonnance and included in lines 4 on 5 of this form	19.	!	
20.			erty expenses not included in lines 4 or 5 of this forms s on other property	n or on <i>Schedule I: Yo</i> 20a.		0.00
		Real estat		20b.	·	0.00
				20c.	·	
			homeowner's, or renter's insurance		·	0.00
			nce, repair, and upkeep expenses	20d.	·	0.00
			er's association or condominium dues	20e.	·	0.00
21.	Othe	er: Specify:		21.	+\$	0.00
22.	Calc	ulate vour i	monthly expenses			
		•	through 21.		\$	800.00
			2 (monthly expenses for Debtor 2), if any, from Official F	orm 106J-2	\$	
			a and 22b. The result is your monthly expenses.		\$	800.00
	220.	Add lifte 226	a and 22b. The result is your monthly expenses.		Ψ	800.00
23.			monthly net income.			
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	800.00
	23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	800.00
	23c.		our monthly expenses from your monthly income.	22	<u></u>	0.00
		The result	is your monthly net income.	23c.	\$	0.00
24	Dc		no impressor and designed in commencer with the street	veer often veer file (I.)	farma	
<b>∠4</b> .			an increase or decrease in your expenses within the ou expect to finish paying for your car loan within the year or do			or decrease because of a
			terms of your mortgage?	, ou expect your mortgage p	Jaymont to increase	of dooredge because of a
	■ No		,			
			Explain hara:			
	□ Ye		Explain here:			

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Fill in this info	ormation to identify your	case:			
Debtor 1	Renee D. Maentai	nis			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)		<del></del>			Check if this is an amended filing
Official Fo	rm 106Dec				
Declara	tion About a	n Individual	<b>Debtor's Sc</b>	chedules	12/15
obtaining mon years, or both.		connection with a bank			ement, concealing property, or 00, or imprisonment for up to 20
Did you p	pay or agree to pay some	one who is NOT an attorr	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sumr	nary and schedules fil	ed with this declaration	on and
X /s/ Re	enee D. Maentanis		X		
Rene	e D. Maentanis ture of Debtor 1		Signature o	f Debtor 2	

Date

Date **October 2, 2017** 

	Ou	.50 17 20-50	Document	Page 44 of 67	00.20	10/02/17 1:50P
Fill in t	his inforn	nation to identify your	case:			
Debtor	1	Renee D. Maenta				
Debtor	2	First Name	Middle Name	Last Name		
(Spouse if		First Name	Middle Name	Last Name	-	
United :	States Ba	nkruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS		
Case no (if known)	_					Check if this is an mended filing
		rm 107 of Financial A	Affairs for Individu	als Filing for Bankrup	tcy	4/1:
nforma	tion. If m	ore space is needed, a n). Answer every quest	attach a separate sheet to this	filing together, both are equally res s form. On the top of any additional		
		r current marital status		rou Bololo		
_		Current maritar status	) i			
■	Married Not mar	ried				
2. Du	ring the la	ast 3 years, have you li	ived anywhere other than whe	ere you live now?		
	No Yes. Lis	t all of the places you liv	red in the last 3 years. Do not in	aclude where you live now.		
De	ebtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Address:		Dates Debtor 2 lived there
				equivalent in a community property a, New Mexico, Puerto Rico, Texas, V		
	No Yes. Ma	ake sure you fill out <i>Sch</i> e	edule H: Your Codebtors (Officia	al Form 106H).		
Part 2	Explai	n the Sources of Your	Income			
Fill	in the tota	al amount of income you	received from all jobs and all b	business during this year or the tw usinesses, including part-time activitie gether, list it only once under Debtor 1	es.	ndar years?
	No					
	Yes. Fill	in the details.				

From January 1 of current year until the date you filed for bankruptcy:

Official Form 107

Sources of income

Check all that apply.

Debtor 1

bonuses, tips Operating a business Debtor 2

Sources of income Check all that apply.

☐ Wages, commissions,

**Gross income** (before deductions and exclusions)

■ Wages, commissions,

☐ Operating a business

bonuses, tips

**Gross income** 

exclusions)

(before deductions and

\$0.00

Desc Main Case 17-29490 Doc 1 Filed 10/02/17 Entered 10/02/17 14:06:23 Page 45 of 67 Document ase number (if known) Debtor 1 Renee D. Maentanis Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$21,000.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$23,000.00 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until Unemployment \$5,600.00 the date you filed for bankruptcy:

Part 3:	List Certain Pay	ments You Made Before	You Filed for Bankruptcy
---------	------------------	-----------------------	--------------------------

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

□ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

■ No. Go to line 7.

Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address

Dates of payment

Total amount

paid

Amount you

Was this payment for ...

Case 17-29490

Debtor 1 Renee D. Maentanis

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.							
	■ No							
	☐ Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a d	ebt that benefited an		
	■ No							
	☐ Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name		
Pal	rt 4: Identify Legal Actions, Repossession	ns and Foreclosures						
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.	cases, small claims action	s, divorces, collection	on suits, paternity a	ctions, suppor	t or custody		
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case		
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below  No. Go to line 11.  ☐ Yes. Fill in the information below.	w.	erty repossessed, f		hed, attached			
	Creditor Name and Address	Describe the Property		Date		Value of the property		
		Explain what happened	d					
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becomes No  Yes. Fill in the details.		luding a bank or fi	nancial institution	, set off any a	amounts from your		
	Creditor Name and Address	Describe the action the	e creditor took	Date taken	action was	Amount		
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  ■ No □ Yes		erty in the possess			efit of creditors, a		
Pai	rt 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gift	s with a total value	of more than \$60	0 per person	?		
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value		
	Person to Whom You Gave the Gift and Address:							

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14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  No							
	Yes. Fill in the details for each gift or co Gifts or contributions to charities that to more than \$600		on.  Describe what you contributed		Dates you contributed	Value		
	Charity's Name Address (Number, Street, City, State and ZIP Code)				•••••			
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankrup or gambling?	tcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of the	eft, fire, other disaster		
	■ No							
	☐ Yes. Fill in the details.							
		Descri	be any insurance coverage for the lo	oss	Date of your	Value of property		
			the amount that insurance has paid. Lee claims on line 33 of Schedule A/B:		loss	lost		
Par	t 7: List Certain Payments or Transfers			, ,				
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition pr  No Yes. Fill in the details.	reparir	g a bankruptcy petition?			erty to anyone you		
	Person Who Was Paid Address Email or website address		Description and value of any property transferred		Date payment or transfer was made	Amount of payment		
	Person Who Made the Payment, if Not Yo David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090	ou	Attorney Fees		8/1/17 - 10/1/17	\$500.00		
17.	Within 1 year before you filed for bankrup promised to help you deal with your credit Do not include any payment or transfer that y	itors o	to make payments to your creditor		r transfer any propo	erty to anyone who		
	■ No □ Yes. Fill in the details.							
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.							
	No							
	Yes. Fill in the details.			_				
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made		
	Person's relationship to you			F 3 11. OX				

Debtor 1 Renee D. Maentanis

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Debtor 1 Renee D. Maentanis

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19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot ■ No ■ Yes. Fill in the details.		ny property to a	self-settled	d trust or similar device o	of which you are a
	Name of trust	Description and	value of the pro	perty trans	ferred	Date Transfer was made
Par	List of Certain Financial Accounts, Inst	truments, Safe Deposi	t Boxes, and St	orage Unit	s	
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ ■ No □ Yes. Fill in the details.	other financial accou	nts; certificates	of deposit		
		Last 4 digits of account number	Type of according trument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	<ul> <li>Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)			the contents	Do you still have it?	
22.	Have you stored property in a storage unit or  ■ No □ Yes. Fill in the details.	r place other than you	r home within 1	year befor	e you filed for bankrupto	y?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Describe the contents  have it?					
Par	dentify Property You Hold or Control f	or Someone Else				
23.	Do you hold or control any property that som for someone.  No	neone else owns? Incl	ude any proper	ty you borr	owed from, are storing f	or, or hold in trust
	Yes. Fill in the details. Owner's Name	Where is the pro	perty?	Describe t	the property	Value
	Address (Number, Street, City, State and ZIP Code)	(Number, Street, City, Code)				
Par	t 10: Give Details About Environmental Info	rmation				

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Renee D. Maentanis

24.	Has any governmental unit notified you that y	ou may be liable or potentially liable	e unde	er or in violation of an environme	ntal law?	
	■ No					
	Yes. Fill in the details.					
	Name of Site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of a	ny release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice	
26.	Have you been a party in any judicial or admi	nistrative proceeding under any env	rironm	ental law? Include settlements a	nd orders.	
	■ No					
	Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Natu	ire of the case	Status of the case	
Par	t11: Give Details About Your Business or Co	onnections to Any Business				
27.	Within 4 years before you filed for bankruptcy	v. did vou own a business or have a	nv of t	he following connections to any	business?	
	☐ A sole proprietor or self-employed in	•	•	•		
	☐ A member of a limited liability compa					
	☐ A partner in a partnership	ny (220) or minica habinty partnersi		,		
	☐ An officer, director, or managing exec	cutive of a cornoration				
	_	·				
	☐ An owner of at least 5% of the voting		l			
	No. None of the above applies. Go to Pa					
	Yes. Check all that apply above and fill in		s.			
	Address	Describe the nature of the business		Employer Identification number Do not include Social Security n	umber or ITIN.	
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed		
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	y, did you give a financial statement	to any	one about your business? Inclu	de all financial	
	■ No □ Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				

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Case number (if known) Document Debtor 1 Renee D. Maentanis

Part 1	2: Sign Below		
are tru with a	e and correct. I unde	his <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that the ans stand that making a false statement, concealing property, or obtaining money or property by fraud in conn result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  , and 3571.	
/s/ Re	enee D. Maentanis		
Rene	e D. Maentanis	Signature of Debtor 2	
Signa	ture of Debtor 1		
Date	October 2, 2017	Date	
Did yo	u attach additional p	ges to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?	
■ No			
☐ Yes			
Did yo	u pay or agree to pay	someone who is not an attorney to help you fill out bankruptcy forms?	
■ No			
☐ Yes	. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	

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Fill in this information to identify your case:					
Debtor 1	Renee D. Maentar	nis			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing

#### Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Del	otor 1 Renee D. Maentanis	Case number (if known)	
[ F	name: Description of property securing debt:	<ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	☐ Yes
For in th	t 2: List Your Unexpired Personal Property Leases any unexpired personal property lease that you listed the information below. Do not list real estate leases. U may assume an unexpired personal property lease if	d in Schedule G: Executory Contracts and Unexpired nexpired leases are leases that are still in effect; the	lease period has not yet ended.
Des	scribe your unexpired personal property leases		Will the lease be assumed?
Des	ssor's name: scription of leased operty:		□ No □ Yes
Des	ssor's name: scription of leased operty:		□ No □ Yes
Des	ssor's name: scription of leased perty:		□ No □ Yes
Des	ssor's name: scription of leased perty:		□ No □ Yes
Des	ssor's name: scription of leased perty:		□ No □ Yes
Des	ssor's name: scription of leased perty:		□ No □ Yes
Des	ssor's name: scription of leased perty:		□ No □ Yes
Und	t 3: Sign Below ler penalty of perjury, I declare that I have indicated m	ny intention about any property of my estate that sec	cures a debt and any personal
	perty that is subject to an unexpired lease.		
X	/s/ Renee D. Maentanis Renee D. Maentanis Signature of Debtor 1	Signature of Debtor 2	
	Date October 2 2017	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

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Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-29490 Doc 1 Filed 10/02/17 Entered 10/02/17 14:06:23 Desc Main Document Page 57 of 67

B2030 (Form 2030) (12/15)

#### United States Bankruptcy Court Northern District of Illinois

In r	e <b>Renee D. Mae</b>	ntan	ie				Case No.		
111 1	e <u>Ronoo Bi ma</u>	iiiaii			Debtor(s)		Chapter	7	
			OSURE OF CO					` ´	
1.	compensation paid to be rendered on behavior	o me v lf of tl	29(a) and Fed. Bankr within one year befor he debtor(s) in conten	e the filing of the purpose the purpose of the purp	petition in bankru onnection with th	aptcy, or agreed the bankruptcy of	d to be paid	to me, for service	
			nave agreed to accept					1,500.00	
	Prior to the fili	ng of t	this statement I have i	received		\$		500.00	
	Balance Due					\$		1,000.00	
2.	The source of the co	mpen	sation paid to me was	3:					
	Debtor		Other (specify):						
3.	The source of comp	ensatio	on to be paid to me is	:					
	Debtor		Other (specify):						
4.	■ I have not agree	d to sl	hare the above-disclos	sed compensation	with any other pe	erson unless the	ey are meml	bers and associate	es of my law firm.
			the above-disclosed t, together with a list						my law firm. A
5.	In return for the abo	ve-dis	sclosed fee, I have ag	reed to render lega	l service for all a	aspects of the b	ankruptcy c	ase, including:	
	b. Preparation and	filing	s financial situation, a of any petition, sched debtor at the meeting	lules, statement of	affairs and plan v	which may be i	required;	-	oankruptcy;
	d. [Other provision	s as ne						_	rmation
	agreemer	nts ar	nd applications as iens on household	needed; prepar	ation and filing	g of motions	pursuant	to 11 USC 522	(f)(2)(A) for
6.	Represer	tatio	btor(s), the above-disc n of the debtors in other adversary p	any dischargea			avoidance	es (except in C	hapter 13
				CERT	TIFICATION				
this	I certify that the fore bankruptcy proceeding	egoing ng.	is a complete statem	ent of any agreeme	ent or arrangemen	nt for payment	to me for re	epresentation of t	he debtor(s) in
	October 2, 2017				/s/ David M. S	Siegel			
	Date				David M. Sie				
					Signature of At David M. Sie		atos		
					790 Chaddic		ales		
					Wheeling, IL				
					(847) 520-810				
					Name of law fit	rm			

#### **Chapter 7 Bankruptcy Retainer Agreement**

This agreement acknowledges that the undersigned individual(s) [Client(s)] hereby retains and employs the Law Firm of DAVID M. SIEGEL & ASSOCIATES [Attorney] for representation in a Chapter 7 bankruptcy case. In consideration for services rendered and to be rendered, the Client agrees to pay Attorney as follows:

- a) A **FLAT FEE** as specified in paragraph H will be required to file a bankruptcy petition for the Client and for representation of the Client through discharge. The fee includes all required court costs and filing fees, as well as compensation for Attorney's time and labor. The fee is immediate compensation for the firm's commitment to perform future services; the fee is property of the firm and may be deposited in the firm's operating or business account.
- b) Representation shall begin upon execution of this agreement and tender of the initial payment, and will continue until the end of the case. The fee includes the preparation, review, and revision of the bankruptcy petition, communications with the Client, representation and appearance at the §341 Meeting of Creditors and §2004 examinations as necessary, communication with the bankruptcy and United States trustees, communication with creditors, review and completion of reaffirmation agreements, and court appearances.
- c) The fee **does not** include representation in any adversarial proceedings. The Client and Attorney may enter in to an additional agreement to provide for representation in an adversarial proceeding. In the event that the case is converted to another Chapter, there may be an additional fee.
- d) Additional Fees:
  - A fee of \$250.00 shall be added in the event that Client misses the scheduled §341 Meeting of Creditors.
  - A fee of \$100.00 shall be added to amend Schedules D, E, and F to include creditors who were not originally provided by the Client. The Client has the full responsibility to ensure that all creditors are listed.
  - A fee of \$25.00 shall be added for any non-sufficient/returned checks. Post-dated checks are not accepted and will be voided upon receipt.
  - A fee of \$820.00 shall be added to reopen a case and file the second credit counseling certificate if the Client fails to take the second credit counseling course and provide Attorney with the certificate in a timely fashion.
- e) The Client will be billed on any outstanding balance at the rate of \$100.00 every two weeks. Clients who fail to make payments as required will be assessed late fees in the amount of \$25.00 per billing period plus interest at the rate of 18% per year on any unpaid balance.
- f) No case shall be filed until all fees are paid in full.
- g) In the event that a Client pays the flat fee in full, and later elects to not proceed with the case, the Client is entitled to a refund of the court costs and filing fees only.

#### **Important Bankruptcy Information**

#### **Debts that are Discharged**

The Chapter 7 discharge order eliminates a Client's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different Chapter of the Bankruptcy Code and converted to a Chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

#### **Debts that are Not Discharged**

Some of the common types of debts which are not discharged in a Chapter 7 bankruptcy case are:

a) Debts for most taxes;

H.

- b) Debts that are in the nature of alimony, maintenance, or support;
- c) Debts for student loans;
- d) Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- e) Debts for personal injuries or death caused by the Client's operation of a motor vehicle while intoxicated;
- f) Some debts that are not properly listed by the Client;
- g) Debts that the bankruptcy court specifically determines to be non-dischargeable;

The FLAT FEE for representation in this matter will be \$

h) Debts for which the Client has given up the discharge protection by signing reaffirmation agreements in compliance with the Bankruptcy Code requirements for reaffirming debts.

Client acknowledge that he or she has read this agreement in its entirety, understands it fully, has had an opportunity to ask questions regarding this agreement, is satisfied with it, and accepts it in its entirety.

Date: 9-5-17	signed: Remoo maentanis
	Print: Renee maentanis
Date:	Signed:
	Print:
Date: 9 S 7 Signed:	

Attorney for David M. Siegel

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### **United States Bankruptcy Court** Northern District of Illinois

In re	Renee D. Maentanis		Case No.	
		Debtor(s)	Chapter 7	
	VE	CRIFICATION OF CREDITOR M	<b>MATRIX</b>	
		Number of Creditors: 63		
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credi	tors is true and correct to	the best of my
Date:	October 2, 2017	/s/ Renee D. Maentanis		

Agnieszka E Kowalska Pt 1450 Busch Parkway Suite 115A Buffalo Grove, IL 60089

Alex B Lipowich Md 800 Biesterfield Rd Elk Grove Village, IL 60007

Alice Y Yao-Lee Md c/o Northwest Radiology Associates 520 E 22nd St. Lombard, IL 60148

American Specialty 12800 N Meridian St Carmel, IN 46032

Amerimark 1112 7th Ave. Monroe, WI 53566

Ami K Kothari, MD 9000 Waukegan Rd Suite 200 Morton Grove, IL 60053

Arlington Ridge Pathology S.C. 520 E. 22nd St. Lombard, IL 60148

Belden Jewelers/Sterling Jewelers Attn: Bankruptcy Po Box 1799 Akron, OH 44309

Bioreference Laboratories 481 Edward H Ross Drive Elmwood Park, NJ 07407-3118

Brooktree Health Service 6500 Brooktree Rd Suite 101 Wexford, PA 15090 Cap1/Dress Barn PO Box 5253 Carol Stream, IL 60197

Capital One Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130

CB/Boston Store Bankruptcy Department PO Box 182125 Columbus, OH 43218-2125

CB/Carsons PO Box 182789 Columbus, OH 43218

CB/Dress Barn PO Box 330066 NorthGlenn, CO 80233-8066

CB/DRSSBRN PO Box 182273 Columbus, OH 43218-2273

Choice Recovery Inc 1550 Old Henderson Rd Ste 100 Columbus, OH 43220

Comcast Bankruptcy Department 11621 E. Marginal Way 5 Tukwila, WA 98168-1965

Comenity Bank/Carsons 3100 Easton Square Pl. Columbus, OH 43219

Convergent Outsoucing, Inc Po Box 9004 Renton, WA 98057 David F DuBois, Md c/o Northwest Community Hospital P.O. Box 5990 Carol Stream, IL 60197

First Premier Bank Bankruptcy Department PO Box 5523 Sioux Falls, SD 57117

First Premier Bank 3820 N. Louise Ave. Sioux Falls, SD 57107

Genesis FS Card Servics (Kay Jewele PO Box 4480 Beaverton, OR 97076-4485

Harris & Harris 111 W Jackson Blvd. Suite 400 Chicago, IL 60604

Harris & Harris, Ltd 111 West Jackson Blvd Suite 400 Chicago, IL 60604

Home Depot Bankruptcy Department PO Box 20483 Kansas City, MO 64195

Home Depot Credit Services PO Box 182676 Columbus, OH 43218-2676

IC Systems
444 Highway 96 East
Saint Paul, MN 55164

Illinois Bone & Joint 135 S LaSalle Dpt. 1052 Chicago, IL 60674-1052

Jacob L. Moskovic, MD 120 W Eastman Street Suite 202 Arlington Heights, IL 60004

KAREN J WOODNORTH, LCPC, CADC 23401 N APPLE HILL LN Lincolnshire, IL 60069-2811

Kay Jewelers PO Box 740425 Cincinnati, OH 45274-0425

Kohls/Capital One Kohls Credit Po Box 3043 Milwaukee, WI 53201

Mabtc/tfc Po Box 13306 Virginia Beach, VA 23464

Massey 1251 1st Ave Chippewa Falls, WI 54729

Med Business Bureau 1460 Renaissance Dr #400 Park Ridge, IL 60068

Medical Recovery Specialists 2250 E. Devon Ave., Ste. 352 Des Plaines, IL 60018

Midnight Velvet Attn: Bankruptcy 1112 7th Ave Monroe, WI 53566

Midwest Anes Partners PO Box 1123 Jackson, MI 49204 Midwest Anesthesia LTD 3407 Momentum Place Chicago, IL 60689-5334

Miramed 255 W. Michigan Ave. Jackson, MI 49201

Monroe And Main 1112 Seventh Ave. Monroe, WI 53566

NCH Medical Group 25228 Network Place Chicago, IL 60673-1252

Northwest Community Healthcare PO Box 22215 Beachwood, OH 44122

Northwest Community Hospital P.O. Box 5990 Carol Stream, IL 60197

Northwest Community Hospital Schaumburg Treatment Center 519 South Roselle Road Schaumburg, IL 60193

Northwest Radiology Associates Po Box 646 Oak Lawn, IL 60454

Northwest Suburban Foot & Ankle Cli 2010 N Harlem Ave Elmwood Park, IL 60707-3119

Oracle Reference Labs, LLC 11350 SW Village Parkway Suite 326 Port Saint Lucie, FL 34987-2352

Premier Vien Center 520 E 22nd Street Lombard, IL 60148

Sharon Spak-Schreiner, MD 1051 W Rand Rd Suite 100 Arlington Heights, IL 60004

SYNCB/Pay Pal Bankrupcty Notice PO Box 5138 Timonium, MD 21094

Syncb/PLCC Attn: Bankruptcy Po Box 965064 Orlando, FL 32896

Synchrony Bank/ JC Penneys Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

Synchrony Bank/Gap Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

Synchrony Bank/Sams Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

THD/CBNA (Home Depot)
PO Box 6497
Sioux Falls, SD 57117-6497

The Palm Beach Institute 314 10th Street West Palm Beach, FL 33401

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US Bank/Rms CC Card Member Services Po Box 108 St Louis, MO 63166

Viant Health Payment Solutions 1105 West 2400 South Salt Lake City, UT 84119

WFNNB/DRESSBARN
Bankruptcy Department
PO Box 182789
Columbus, OH 43218